

## DISCLOSURE SUMMARY PAGE

FORM

DR-2

(Rev. 01/98)

DISCLOSURE  
REPORT

For Office Use Only

Comm. #

Indexed

Audited

Computer

COMMITTEE NAME (Must be same as on Statement of Organization)

IMPORTANT: Indicate type of committee you are reporting for: ☒ 2

- ( 1 ) Statewide/Legislative Candidate ( 2 ) Statewide PAC ( 3 ) State Party ( 4 ) County/Local Candidate  
 ( 5 ) County PAC ( 6 ) Ballot Issue/Franchise Committee ( 7 ) County/City Central Committee  
 ( 8 ) Support State of Candidates

SIGNATURE OF TREASURER (or person filing this report)

TELEPHONE

DATE SIGNED

Routine Penalties Due For Late Filed Reports Range from \$20 to \$800

## SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A May 19, 2008 REPORT FOR AN/A (1) ELECTION / (2) NON-ELECTION YEAR.  
 (report date) Indicate one ☒ 1

☐ CHECK IF AMENDMENT TO REPORT DATED \_\_\_\_\_

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.  
 (You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

County &amp; Local Committees, enter County in which Election is held

## STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

## ADD TOTAL MONEY TAKEN IN THIS PERIOD

Schedule A: Cash Contributions total (Attach Schedule A) .....

Schedule F: Loans Received total (Attach Schedule F) .....

Schedule H: Total Sales of Campaign Property (Attach Schedule H) .....

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL .....\$

## SUBTRACT TOTAL MONEY SPENT THIS PERIOD

Schedule B: Expenditures total (Attach Schedule B) .....

Schedule F: Loan Repayments total (Attach Schedule F) .....

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3) .....

UNPAID BILLS (From Schedule D - Attach Schedule D) .....

IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E) .....

OUTSTANDING LOANS (From Schedule F - Attach Schedule F) .....

## CANDIDATE COMMITTEES ONLY:

CONSULTANT BREAKDOWN (Schedule G Attached?)

\_\_\_ YES \_\_\_ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

*Clinton County Republican Women's Club*

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

NOTE: ANY PERSON, OTHER THAN AN INDIVIDUAL, THAT CONTRIBUTES MORE THAN \$750 TO YOUR CAMPAIGN MAY HAVE FILING RESPONSIBILITIES AND SHOULD IMMEDIATELY CONTACT THE BOARD.

CAUTION: Section 68B.32A(6), prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YYYY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
2008					
1/15	ID# CK#	<i>Edith R. Pfeffer 2008 Dues</i> 931-2nd Ave. So. Clinton, Ia 52732		\$ 20. <sup>00</sup>	<input type="checkbox"/>
1/15	ID# CK#	<i>Janette Burryman 2008 Dues</i> 890-15th Ave. N.W. Clinton, Ia 52732 + Donation		30. <sup>00</sup>	<input type="checkbox"/>
1/15	ID# CK#	<i>Diane Wheeler 2008 Dues</i> 2617 West Stockwell Lane Clinton, Ia 52732 + Donation		25. <sup>00</sup>	<input type="checkbox"/>
1/15	ID# CK#	<i>Arline Metzger</i> 2916 N. 3rd St. Clinton, Ia 52732	2008 Dues	20. <sup>00</sup>	<input type="checkbox"/>
1/15	ID# CK#	<i>Carolyn K. Telford</i> 1315 N. 3rd St. Clinton, Ia 52732	2008 Dues	20. <sup>00</sup>	<input type="checkbox"/>
2/2/08	ID# CK#	<i>Shirley McBrine</i> 308 N. 4th St. Clinton, Ia 52732	2008 Dues	20. <sup>00</sup>	<input type="checkbox"/>
3/4/08	ID# CK#	<i>Mary Louise Rutenbeck</i> 2701-2nd Ave. So. Clinton, Ia 52732	2008 Dues	20. <sup>00</sup>	<input type="checkbox"/>
3/4/08	ID# CK#	<i>Jensen, Rose</i> 3309 McKinley St. Clinton, Ia 52732	2008 Dues + donation	30. <sup>00</sup>	<input type="checkbox"/>
3/4/08	ID# CK#	<i>Mrs. R. P. Furst</i> 100-33rd Ave No. Clinton, Ia 52732	2008 Dues	20. <sup>00</sup>	<input type="checkbox"/>
3/4/08	ID# CK#	<i>Jane Sorenson</i> 2318-13th Ave. So. Clinton, Ia 52732	2008 Dues	20. <sup>00</sup>	<input type="checkbox"/>

SUB-TOTAL

\$225.<sup>00</sup>

TOTAL (if last page of this schedule)

\$

\* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY  
RECEIPTS

☐ CHECK THIS BOX IF  
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Clinton County Republican Women's Club

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3/4/08	ID# CK#	Lynn McGraw 37 Kather Lane Clinton, Ia 52732	2008 Dues	\$ 20. <sup>00</sup>	<input type="checkbox"/>
3/10/08	ID# CK#	Jill Dawison 1639-215th St. Grand Mound, Ia 52729	2008 Dues	20. <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Becky Weaver 600 Argyle Ct. Clinton, Ia 52732	2008 Dues	10. <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Ruth Caven 233.7 Lafayette Terrace Clinton, Ia 52732		20. <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Julie Allsee 3514 Valley Oaks Dr. Clinton, Ia 52732		20. <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Patricia Parsons 1601 S. Washington Blvd Camarache, Ia 52730		20. <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Janis Burken 3753-220th St. Clinton, Ia 52732		20. <sup>00</sup>	<input type="checkbox"/>
	ID# CK#	Carol Coch 1051-11th Ave. N. Clinton, Ia 52732		20. <sup>00</sup>	<input type="checkbox"/>
3/18	ID# CK#	Mrs Darrell Smith 407 Ridgcrest Dr. Clinton, Ia 52732	2008 Dues + 30. <sup>00</sup> Donation	50. <sup>00</sup>	<input type="checkbox"/>
3/18	ID# CK#	Rhonda McIntyre Hubbard 461 Oakhurst Dr. Clinton, Ia 52732	2008 Dues	20. <sup>00</sup>	<input type="checkbox"/>
SUB-TOTAL				\$ 220. <sup>00</sup>	220. <sup>00</sup>
TOTAL (if last page of this schedule)				\$	

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(for Schedule A)

For Instructions, See Back of Form

Reset Form

# CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE <b>A</b> (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

*Clinton County Republican Women's Club*

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4/7/08	ID# CK#	Bess Haan 211.6 East Court Clinton, Ia 52732	2008 Dues + 5.00 Donation	\$ 25.00	<input type="checkbox"/>
4/7/08	ID# CK#	Pat Reisenberger 625 Breezy Point Drive Clinton, Ia 52732		5.00	<input type="checkbox"/>
4/22/08	ID# CK#	Dorothy Dietrich 211-4th Ave Camanche, Ia 52730-2325	2008 Dues Ass. Member	15.00	<input type="checkbox"/>
4/22/08	ID# CK#	Lucille Henrichsen Clinton, Ia 52732	2008 Dues Association	10.00	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 55.00

TOTAL (if last page of this schedule)

\$

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(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

# EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE <b>B</b> (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

*Clinton County Republican Women's Club*

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
2/2/08	ID# CK# 1322*	1st District Republican Women 90 Carolyn Talbott, Treas. 1315 N. 3rd St. Clinton, Ia 52732	dues owed 1st District for 32 member @ 35¢ ea	\$11.20
2/2/08	ID# CK# 1323	1st District Republican Women 90 Carolyn Talbott, Treas. 1315 N. 3rd St. Clinton, Ia 52732	Club fee for Clinton Club due 1st Dist.	25.00
2/2/08	ID# CK# 1324	Iowa Federation of Republican Women Karen McAllister 3717-190th St. Farquhar, Iowa 51639-4000	Dues for 30 members @ 15.00 ea.	450.00
2/20/08	ID# CK# 1325	City of Clinton, Park & Rec. Dept. Erickson Center Clinton, Ia. 52732	Rental fee on Eagle Point Park for July 3 Event	93.00
4/7/08	ID# CK# 1326	1st District Treasurer 90 Carolyn Talbott 1315 N. 3rd St. Clinton, Ia 52732	1st Dist dues for 11 mem @ 35¢ each	3.85
4/7/08	ID# CK# 1327	Iowa Federation of Republican Women Karen McAllister 3717-190th St. Farquhar, Ia 51639-4000	Dues for 10 members @ 15.00 each	150.00
4/22/08	ID# CK# 1328	Deane Cassaday 3110 Harts Mill Road Clinton, Iowa 52732	Reimburse 100 Stamps @ 41¢ ea.	41.00
	ID# CK#			
SUB-TOTAL				\$ 774.05
TOTAL (if last page of this schedule)				\$ 774.05

## THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.402(3)(i).)

\* Return to Numerical check after a brief break  
of 3 checks used during a long audit (1421, 1422, 1423)  
used during  
audit

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